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## BIB DATA SHEET

CONFIRMATION NO. 6143

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/665,799	09/18/2003 RULE	015	3727	IR 6320-00

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appn claims benefit of 60/412,186 09/20/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
12/11/2003

Foreign Priority claimed 35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged /Laura C Guidotti/ Examiner's Signature			NJ	2	30	3

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**TITLE**

Toothbrush

<b>FILING FEE RECEIVED</b> 930	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)

- 1.17 Fees (Processing Ext. of time)
- 1.18 Fees (Issue)
- Other \_\_\_\_\_
- Credit